

## **REMARKS**

This RCE and Preliminary Amendment are being filed after the Notice of Allowance and before the deadline for paying the Issue Fee. The Issue Fee is not being paid. This RCE and Preliminary Amendment are necessitated by the fact that ATCC has not provided Applicants with the necessary deposit numbers for the rotavirus strains. As such, it is not appropriate for this application to issue.

The amendments to the Claims herein add the ATCC deposit numbers for the *E. coli* strains which have been deposited with ATCC. Also the amendments correct an error that seems to have occurred in the original filing. It appears that the Specification refers to two strains of *E. coli* as strain "B42" and "B117" (see page 5, lines 28-29; page 13, lines 4-5 and lines 16-17), yet the Claims had inadvertently referred to these strains as "B43" and "B141". This amendment corrects this inadvertent error in the Claims. No new matter is being added. Also enclosed is a Statement of Availability.

The amendment to the Specification adds the ATCC deposit number and a statement that the deposits were made according to the Budapest Treaty with ATCC and provides the address of ATCC.

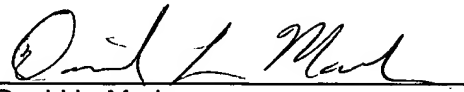
At this time, Applicants are awaiting the ATCC deposit numbers for the rotavirus strains where have been submitted to ATCC. Upon receipt of those deposit numbers, Applicants will amend the Claims and Specification to add the ATCC deposit numbers. Applicants will also submit at that time a Statement of Availability for the rotavirus strains.

Because all claims were previously paid for in prior amendments and because no new claims are being submitted, no fee is required for the claims. Applicants are submitting the fee for the RCE by way of authorization to debit the undersigned's deposit account. No extension of time fee is required. The Commissioner is also authorized to deduct any other fee necessary to keep this application pending, from Deposit Account 19-0134.

Should the Examiner have any questions regarding this Amendment, the Examiner is requested to the undersigned at the number indicated.

Respectfully submitted,

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